

958847

PHOTO
RIGHT THUMB PRINT

## DISPOSITIONS

AKA'S

RELEASE  
INFO

BOND AMOUNT	BONDSMAN NAME/BONDING COMPANY		BONDSMAN
POWER NUMBER			
RELEASED BY	DATE OF RELEASE	TIME OF RELEASE	OTHER

4863

OBT NUMBER		COMPLAINT/ARREST AFFIDAVIT		POLICE CASE NO.	
SPECIAL OPERATION:		<input type="checkbox"/> FELONY <input type="checkbox"/> MISD <input type="checkbox"/> TRAFFIC <input type="checkbox"/> JUV <input type="checkbox"/> DV <input type="checkbox"/> MOVES <input type="checkbox"/> CIV INF <input type="checkbox"/> WARRANT		JAIL NO. <b>07746</b>	
FUGITIVE WARRANT: <input type="checkbox"/> In state <input type="checkbox"/> Out of state		MTHD <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown		COURT CASE NO. <b>B0741363</b>	
IDS NO.		AGENCY CODE <b>02</b> MUNICIPAL P.D. DEF. ID NO.		MPOD RECORDS AND ID NO. <b>95</b>	
DEFENDANT'S NAME (LAST, FIRST, MIDDLE)		ALIAS and / or STREET NAME		SIGNAL: <input type="checkbox"/> 100 <input type="checkbox"/> 150 <input type="checkbox"/> 200 <input type="checkbox"/> 300 <input type="checkbox"/> 400 <input type="checkbox"/> 500	
<b>027 YESILPINAR, BILROL</b>					
DOB (MM/DD/YYYY) <b>06/18/66</b> AGE <b>41</b> RACE <b>W</b> SEX <b>M</b> <input type="checkbox"/> Hispanic <input type="checkbox"/> Not Hispanic		HEIGHT <b>5'10</b> WEIGHT <b>165</b> HAIR COLOR <b>BL</b> HAIR LENGTH <b>Med</b> HAIR STYLE <b>AV</b> EYES <b>BR</b> GLASSES <input type="checkbox"/> Yes <input type="checkbox"/> No		FACIAL HAIR <b>CLN</b> TEETH <b>W</b>	
ETHNICITY:		SCARS, TATTOOS, UNIQUE PHYSICAL FEATURES (Location, Type, Description)		PLACE OF BIRTH (City, State/Country)	
		<b>N/A</b>		<b>TURKEY</b>	
LOCAL ADDRESS (Street, Apt. Number)		(City) (State) (Zip)		PHONE	
<b>448 OCEAN DR #302 MIA BEACH, FL</b>					
PERMANENT ADDRESS (Street, Apt. Number) <input type="checkbox"/> HOMELESS <input type="checkbox"/> UNKNOWN		(City) (State/Country) (Zip)		PHONE	
		<b>33139</b>			
<input type="checkbox"/> BUSINESS OR <input type="checkbox"/> SCHOOL NAME AND ADDRESS (Street) (City) (State/Country) (Zip)				PHONE	
DRIVER'S LICENSE NUMBER / STATE		SOCIAL SECURITY NO.		WEAPON SEIZED? Type <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>N/A</b>		<b>N/A</b>		If Def. has Concealed Weapons Permit. PERMIT # W- <input type="checkbox"/> Yes <input type="checkbox"/> No	
ARREST DATE (MM/DD/YYYY) <b>07/26/07</b> ARREST TIME (HHMM) <b>0155</b>		ARREST LOCATION (include name of business)		INDICATION OF: Y N UNK Alcohol influence <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Drug influence <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
<b>448 OCEAN DR #302</b>				GRID	
CO-DEFENDANT NAME (Last, First, Middle)		DOB (MM/DD/YYYY)		<input type="checkbox"/> IN CUSTODY <input type="checkbox"/> FELONY <input type="checkbox"/> JUVENILE	
1.				<input type="checkbox"/> AT LARGE <input type="checkbox"/> DV <input type="checkbox"/> MISDEMEANOR	
CO-DEFENDANT NAME (Last, First, Middle)		DOB (MM/DD/YYYY)		<input type="checkbox"/> IN CUSTODY <input type="checkbox"/> FELONY <input type="checkbox"/> JUVENILE	
2.				<input type="checkbox"/> AT LARGE <input type="checkbox"/> DV <input type="checkbox"/> MISDEMEANOR	
CO-DEFENDANT NAME (Last, First, Middle)		DOB (MM/DD/YYYY)		<input type="checkbox"/> IN CUSTODY <input type="checkbox"/> FELONY <input type="checkbox"/> JUVENILE	
3.				<input type="checkbox"/> AT LARGE <input type="checkbox"/> DV <input type="checkbox"/> MISDEMEANOR	
JUV. <input type="checkbox"/> Parent (Name) (Street, Apt. Number) (City) (State/Country) (Zip) (Phone) Contacted? <input type="checkbox"/> Yes <input type="checkbox"/> No					
<input type="checkbox"/> Guardian <input type="checkbox"/> Foster Care					
CHARGES		CHARGE AS:	COUNTS	FL STATUTE NUMBER	VIOL. OF SECT
1. OFFERING TO		<input type="checkbox"/> F.S. <input type="checkbox"/> ORD	1	79607	
2. COMMIT PROSTITUTION		<input type="checkbox"/> F.S. <input type="checkbox"/> ORD			
3.		<input type="checkbox"/> F.S. <input type="checkbox"/> ORD			
4.		<input type="checkbox"/> F.S. <input type="checkbox"/> ORD			
WARRANT TYPE OR TRAFFIC CITATION					
<input type="checkbox"/> AC <input type="checkbox"/> CAPIAS <input type="checkbox"/> BW <input type="checkbox"/> FW <input type="checkbox"/> PW <input type="checkbox"/> JUV PU <input type="checkbox"/> JAW <input type="checkbox"/> DWV <input type="checkbox"/> WRIT					
CASE #:					
<input type="checkbox"/> AC <input type="checkbox"/> CAPIAS <input type="checkbox"/> BW <input type="checkbox"/> FW <input type="checkbox"/> PW <input type="checkbox"/> JUV PU <input type="checkbox"/> JAW <input type="checkbox"/> DWV <input type="checkbox"/> WRIT					
CASE #:					
<input type="checkbox"/> AC <input type="checkbox"/> CAPIAS <input type="checkbox"/> BW <input type="checkbox"/> FW <input type="checkbox"/> PW <input type="checkbox"/> JUV PU <input type="checkbox"/> JAW <input type="checkbox"/> DWV <input type="checkbox"/> WRIT					
CASE #:					
<input type="checkbox"/> AC <input type="checkbox"/> CAPIAS <input type="checkbox"/> BW <input type="checkbox"/> FW <input type="checkbox"/> PW <input type="checkbox"/> JUV PU <input type="checkbox"/> JAW <input type="checkbox"/> DWV <input type="checkbox"/> WRIT					
CASE #:					
The undersigned certifies and swears that he/she has just and reasonable grounds to believe, and does believe that the above named Defendant committed the following violation of law:					
On the <b>26</b> day of <b>JULY</b> 20 <b>07</b> at <b>0155</b> (HHMM) at <b>448 OCEAN DRIVE #302</b> (Location, include name of business) (Narrative, be specific)					
<b>DEF. WAS CONTACTED, VIA CNIGLIST, &amp; AGREED TO PROVIDE FULL SERVICE SEX FOR \$150. UPON ARRIVAL DEF. STATED THAT IT WAS SHE WHO I HAD SPOKEN TO ON PHONE. TAKEDOWN SIGNAL GIVEN &amp; DEF. PLACED UNDER ARREST DET. DOZIER (#343).</b>					
HOLD FOR OTHER AGENCY		VERIFIED BY		<input type="checkbox"/> HOLD FOR BOND HEARING. DO NOT BOND OUT (Officer Must Appear at Bond Hearing).	
Name:				<input type="checkbox"/> HOLD FOR BOND HEARING. DO NOT BOND OUT (Officer Must Appear at Bond Hearing).	
I SWEAR THAT THE ABOVE STATEMENT IS TRUE AND CORRECT.		SWORN TO AND SUBSCRIBED BEFORE ME		<b>HOLD FOR BOND HEARING JUDGE</b>	
OFFICER'S / COMPLAINANT'S SIGNATURE		THE UNDERSIGNED AUTHORITY THIS		You need not appear in court, but must comply with the instructions on the reverse side hereof.	
<b>027 YESILPINAR, BILROL</b>		<b>26 JUL 2007</b>		Signature of Defendant, Juvenile and Parent or Guardian	
NAME (Printed)		AGENCY NAME		Signature of Defendant, Juvenile and Parent or Guardian	
<b>027 YESILPINAR, BILROL</b>		<b>MBPD</b>		<b>26 JUL 2007</b>	
		Deputy of the Court or Notary Public		(right thumb print)	

COMPLAINT/ARREST AFFIDAVIT  
MPOD RECORD COPY

400-5235 FAX

Transport Officer (s) DETROIT, C. CUBEL ID# 777-715 Dept# 02 Taken To DCJ  
 Transport Officer (s) \_\_\_\_\_ ID# \_\_\_\_\_ Dept# \_\_\_\_\_ Taken To \_\_\_\_\_  
 Transport Officer (s) \_\_\_\_\_ ID# \_\_\_\_\_ Dept# \_\_\_\_\_ Taken To \_\_\_\_\_

Does defendant have any signs/complaints of injury? ☐ YES ☐ NO Indicate any signs or complaints of injury regardless whether they happened prior to, during, or after arrest, or whether they have any connection to the arrest at all.  
 (If Yes, complete below data/notify supervisor)

Explain: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Name and Rank of  
 Supervisor Notified: \_\_\_\_\_

#### Defendants Vehicle

YEAR	MAKE	MODEL	TAG	STATE	VIN	COLOR

#### OWNER/DRIVER/DESIGNEE RELEASE FORM & DISCLAIMER OF LIABILITY

Owner/Driver/Designee (O/D/D must read and sign disclaimer of liability if vehicle is left at scene, or removed, or released to O/D/D at scene.

Released to: \_\_\_\_\_ Left on Scene?  
 (Print Name - Signature) D/L # State ☐ YES ☐ NO

The undersigned certifies that he/she is the legal owner/driver/designee of the vehicle described above. In consideration of being permitted to leave the vehicle mentioned at the location, or removed, or released, the undersigned hereby releases and discharges Miami-Dade County and all of its agents and employees for any damage to, or damage caused, theft of, or theft from, the vehicle described above.

Signature of Owner/Driver/Designee

Signature of Officer Witnessing

ID #

IF YOUR VEHICLE IS PARKED MORE THAN 48 HOURS, IT IS SUBJECT TO BE REMOVED

46

MIAMI-DADE COUNTY  
CORRECTIONAL REHABILITATION DEPARTMENT

BOOKING RECORD

2025720

C-0958847



070063346  
BIROL OZYESKPINAR  
MUGSHOT

JAIL NUMBER 070063346	DEFENDANT NAME OZYESKPINAR, BIROL	RACE W	SEX M	DATE OF BIRTH 06/18/68		
ADDRESS 448 OCEAN DR	302	HEIGHT 510	WEIGHT 165	HAIR BLN	EYES BRD	SOCIAL SECURITY NUMBER
CITY AND STATE MIAMI BEACH FL	RESIDENCE DADE	TOR 01:55	TIJ 0402	BOOKED DATE 07/26/07	CELL LOCATION PTRHC	
COURT CASE NUMBER B07-041363	PRINT Y	ARREST LOCATION 448 OCEAN DR #302				

1 - Fingerprint Record

DATE	SEC	INPUT NUMBER	CHARGE, DESCRIPTION / PENALTIES	NO.	CASE/ WARR. NUMBER	BOND AMOUNT
07/26/07		1796070028	PROSTITUTION/OFFER TO SECURE ANOTHER F		B07-041363	500
07/26/07		29959860	HOLD FOR MAGISTRATE			TO BE SET

Handwritten notes and signatures in the middle section of the form.

7/26/07 B07-41363 C(1) SPT / \$2000 7/30 Seraphin/MLC  
7/30/07 B07-41363 - LOK - Francis W. 7/30/07

COMMENTS  Cpl. Sgt. 2	Strip Searched: Yes/Time _____ Date _____ No _____		
	Reason: _____		
	Officer's Name/Badge # (print): _____		
	Signature: _____		
AKA'S	Supervisor's Name/Badge # (print): _____		
	Signature: _____		
	Recording Supervisor/Badge # (print): _____		
	Signature: _____		
RELEASE INFO	BONDSMAN NAME/BONDING COMPANY _____		
	BONDSMAN # _____		
	POWER NUMBER _____		
	OTHER _____		
RELEASED BY M75519		DATE OF RELEASE 7-30-07	TIME OF RELEASE 1117



DATE \_\_\_\_\_

PRISONER'S—SIGNATURE

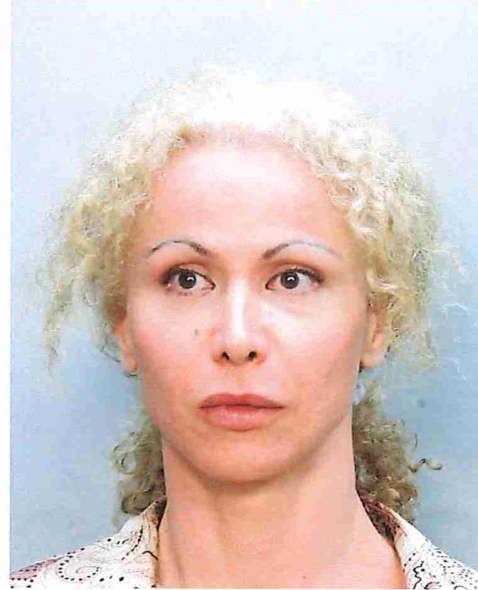
[illegible][illegible]

# Miami-Dade

## Mugshot Profile

**BIROL OZYESKPINAR**

**AGE:** 41  
**JAIL #:** 070063346  
**CIN #:** 0958847  
**Police Case #:** 20070729032  
**Arrest Date:** Jul 26 2007 1:55AM  
**Sex:** MALE  
**Race:** WHITE  
**Height:** 5'10"  
**Weight:** 165  
**Eye Color:** BROWN  
**Hair Color:** BLONDE/STRAWBERRY  
**Hair Length:** MEDIUM  
**Hair Style:** WAVY CURLY  
**Facial Hair:** CLEANSHAVEN



*Redaction Date: Friday, August 16, 2019 2:23:58 PM*

Total Number of Redactions: 1

By Exemption:

"Biometric identification information is exempt. Any record of friction ridge detail, fingerprints, palm prints, and footprints. 119.07(1) and 119.071(5)  
" (Fingerprint Record): 1 instance

By Page:

Page 4 - "Biometric identification information is exempt. Any record of friction ridge detail, fingerprints, palm prints, and footprints. 119.07(1) and 119.071(5)  
" (Fingerprint Record): 1 instance